PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

			OF <u>FBX</u> (3/	11)-213-2883				
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifics	form should be used to correspondence including ed below or directed off trions.	for transmitting the ISSI ng the Putent, advance of perwise in Block 1, by (UE FEE and PUBLICAT rders and notification of a specifying a new corre	ION FEE (if requimaintenance fees vispondence address;	ired). Block vill be mail and/or (b)	3 1 through 5 and to the curren indicating a sep	should be completed to correspondence arate "FEE ADD	eted where address as RESS" for
CURRENT CORRESPOND	pāp	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cunnot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
23702	7590 09/18	/2006	пп4			•		
Bausch & Lon One Bausch & I Rochester, NY 1		1 he Stat add tran	creby certify that the Postal Service wressed to the Mail smithed to the USP	is Fee(s) To vith sufficient Stop ISSL TO (571) 27	Aniling or Transansmittal is being the postage for ling FEE address 3-2885, on the contract of	g deposited with st class mail in a above, or being date indicated belo	the United n envelope ; facsimile ow.	
			· [T	Miche	110 1	Mi Wo		ositor's nune)
			E	NGh.Ch 12.18.1	010	-W/s	lu	(Signmute) (Onto)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNE	Y DOCKET NO.	CONFIRMATIO	ON NO.
10/673,859	0/673,859 09/29/2003		Laurence J. Cull		P03195 1368			
TITLE OF INVENTION SURGERY	N: PERISTALTIC PUMP	WITH AIR VENTING	VIA THE MOVEMENT (OF A PUMP HEAD 12/08 01 FC		TOO 1489.00	DA	1067385
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE OUE	T - RP FC	- 4EO A	300,00 TAL FEE(S) DUE	DA .	aus
nonprovisional	NO	\$1400	\$300	\$0		\$1700	12/18/2	لــــــــــــــــــــــــــــــــــــــ
EXAMINER		ART UNIT	CLASS-SUBCLASS	1	-			
FRANTZ, JESSICA L		3746	417-053000					
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the p	atent front page, lis	st			
CFR 1.363). Change of corresp Address form PTO/Si	ondence address (or Cha B/122) attached.	ngo of Correspondence	(1) the names of up to or agents OR, alternati	vely.	•	12		
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered anorney or	of a single firm (having as a member a received and the names of up to steel and the names of up to steel anomeys or agents. If no name is a will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	pc)	•	•		
		ified below, no assignee eletion of this form is NO	data will appear on the p T a substitute for filing an				locument has bee	n filed for
(A) NAME OF ASSI		responente	(B) RESIDENCE: (CITY	20chest				
Causa	1,00,100	co: pu care		1	,			
Please check the appropr	inte assignee category or	categories (will not be pr	inted on the patent) :	Individual 🖸 Co	rporution or	other privute gr	oup entity Q	overmment
4s. The following fee(s)	ure submitted:	41	D. Puyment of Fee(s): (Plea	nse first reapply at	ıy pr e viousl	ly paid issue fee	shown above)	
	To small entity discount p	Payment by credit card. Form PTO-2038 is attached.						
☐ Advance Order - :	# of Copies		The Director is hereby overpayment, to Depo	unthorized to chur sit Account Numbe	re the requir	red (etc(s), uny de (acclose s	eficiency, or credi in extra copy of th	t any us form).
	tus (from status indicated		D	1::				
	s SMALL ENTITY staru d Publication Fee (if requ		b. Applicant is no lon					er party in
interest as shown by the	records of the United Sta	tes Patent and Trademark	d from anyone other than t Office.					
Authorized Signature		E Lago		Date 8	#Doc	2,20	206	_
Typed or printed nam		<u>. Larsor</u>	<u>} </u>	Registration N	ه <u>ڪ</u>	417		_
WICKSHIP OF AUSTRICE SEA	12-1420,		on is required to obtain or r 1.14. This collection is est depending upon the indiv c Chief Information Office COMPLETED FORMS TO					o process) aring, and complete serce, P.O. Box 1450,
Under the Paperwork Re-	auction Act of 1995, no p	persons are required to rea	spond to a collection of inf	ormation unless it d	ilsplays a va	uid OMB control	number.	
PTOL-85 (Rev. 07/06) A	Approved for use through	04/30/2007.	OMB 0651-0033 (I.S. Patent and True	Jemark Offic	e: U.S. DEPAR	TMENT OF CON	MERCE